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) 5 To 1		PART B - FEE(S)		SMITTAL		4	
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· JUH 1 ;	7 2004	or F		Alexandria, Virg (703) 746-4000	inia 22313-1450		
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				June 14, 2004		(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/768,043	01/22/2001	Ronald J. Lebel			USP-1076-D	2665	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
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NOTE; The Issue Fee and	Publication Fee (if require	June 14, 2004 ed) will not be accepted from a	anyone		-		
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## **SITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:

Ronald J. LEBEL, et al.

Title:

AMBULATORY MEDICAL

APPARATUS AND METHOD

**USING A ROBUST** COMMUNICATION

**PROTOCOL** 

Appl. No.:

09/768,043

Filing Date:

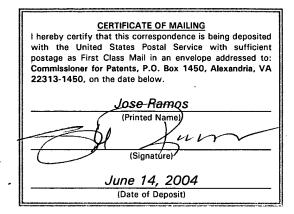
1/22/2001

Examiner:

Daniel Leon Robinson

Art Unit:

3742



## **ISSUE FEE TRANSMITTAL**

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed herewith please find Issue Fee Transmittal Form PTOL-85(B) along with a check in the amount of \$1,663.00 for payment of the Issue Fee, Publication Fee and 11 additional copies of the issued utility patent.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Respectfully submitted

June 14, 2004

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Ted R. Rittmaster

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